

PR001  
05-Jan-12

# Preliminary Report of Accident

U.S. Department of Labor  
Mine Safety and Health Administration



1. Accident Type: Fatal Injury		2. Accident Classification Falling, Rolling or Sliding Rock /Material		3. Date/Time of Accident 10/07/2011 02:00 AM		4. Date/Time of Death 10/07/2011 04:10 AM		5. Fatal Case No 16							
6. Mine Information :															
a) Mining Company Name Owlco Energy LLC			b) Mine Name Mine No 1			c) Parent of Mining Company Curtis Laws									
7. Mine Location :		a) City Partridge		b) County Letcher		c) State KY		8. Mine ID Number: 15-18870		9. Union: NO					
10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUND			11. Number of Mine Employees:		a) Total 18		b) Underground 15		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other 3		
12. Contractor Name:						13. Union		14. Contractor ID Number:							
15. Contractor Address:		a) City		b) County		c) State		d) Zip Code							
16. Number of Contractor Employees:		a) Total		b) Underground		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other					
17. Number of Persons in Mine at Time of Accident:						18. Number of Persons Unaccounted For:									
a) Mine Employees:		5		b) Contractor Employees:		0		a) Mine Employees:		0		b) Contractor Employees:		0	
19) Location of Accident										20. Mining Height:					
<input checked="" type="checkbox"/> 01-Underground		<input type="checkbox"/> 03-Open Pit		<input checked="" type="checkbox"/> 07-Advance Mining		<input type="checkbox"/> 30-Mill/Prep Plant		<input type="checkbox"/> Other (specify)		Feet		Inches			
<input type="checkbox"/> 02-Surface at Underground		<input type="checkbox"/> 06-Dredge Mining		<input type="checkbox"/> 08-Retreat Mining		<input type="checkbox"/> 99-Office Facility				3		10			
21. Nonfatal Injuries:			22. Fatal Injuries:			1									
23. Victim Information :															
a) Name Richard D. Coots					b) Age 23										
c) Regular Job Title: Laborer					d) Activity at Time of Accident: Maintenance					<input checked="" type="checkbox"/> Mine Employee					
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days							
a) Total:		5		b) at the mine:		6		c) at activity (23d)		1		d) with Contractor			
25. Autopsy Performed: If Yes, Location								26. Mine Telephone No.: (606) 589-4665							

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

At approximately 2:00 A.M. on the active 003 MMU, the victim was attempting to repair the conveyor chain on the Jeffrey model 94L bridge conveyor. The victim was positioned underneath the inby portion of the bridge conveyor when the machine suddenly fell, pinning the victim. Other miners on the unit extricated the victim, began C.P.R. and transported the victim to the surface. Paramedics with the ambulance service used an A.E.D and determined there was no need for further rescue efforts.

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

28. Equipment Manufacturer: Jeffrey-Dresser			29. Model: 94-L		
30. District: C0700 Barbourville		32. Field Office: Harlan KY		33. Event Number: 4468822	
34. Accident Investigator: Kevin Doan		35. MSHA Person Notified: Robert Barnes		Date 10/07/2011	
				Time 02:40 A	
36. Type of Report: Amended		37. Name of Preparer and Date Prepared Silas G. Brock		Date 10/24/2011	
38. Reason For Amendment: Change accident classification.					